

Public Works Division 25 West Main Street Auburn, WA 98001 (253) 931-3010

For Staff Use Only
Application No:

Permit Type (circle):	Re	sidential	Commer	cial		
Project Information: Site Address:						
Parcel No. or Legal Description	on: <i>(requi</i>	red)				
Property Owner:	Add	dress:		Phone No.:		
Project Applicant:	Pho	one No.:		Email:		
Contractor:				Phone No.:		
Address:						
State Contractors License #:				Auburn Busine	ess License #:	
		Water	Application			
Existing Meter Box? (Circle)	`	Yes or	No			
No of Units:	Domesti	c Meter Size:	Deduct Mete	er Size:	: Irrigation only Meter Size:	
	ı	Sewer	Application		<u> </u>	
Type of Use (Circle)	lew Conne	ection F	Repair	Demo Cappin	g Tenant Improvement	
		Storm	Application			
Type of Use (Circle)	New Co	nstruction	Repa	air	Grading Only	
Description of Work:						
		(FOR OFF	FICE USE ONLY)			
Domestic Water Meter Permit	Fee:		County Inspe	ection Fee:	Fire line Connection Fee:	
Deduct Water Meter Permit	Irrigation	n Water Meter	Domestic SE	DC:	Irrigation Only Meter SDC:	
Fee:	Permit F	ee:				
Assessment (FF*\$)	Paybacks:	l	Total Wa	ter Fees:	
Sewer Permit Fee:		SDC (RC	E * \$850):	County Ir	nspection Fee:	
Assessment (FF*\$)	Paybacks:		Total Sev	wer Fees:	
Storm Permit Fee:		SDC:				
Assessment (FF*\$)	Paybacks:		Total Sto	rm Fees:	
Application Reviewed By:			Date:		Ok to Issue:	
given express permission by	the owner	r of the subject pro	perty, to submit	this application fo	subject property or I have been or permit. I will comply with all g state contractor registration	

laws.

Application expires 180 days after Date Submitted

Owner/Agent Date
